Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF TENNESSEE		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's	Dwayne First name Allen	First name
	license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Derring Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names and any assumed, trade names and doing business as names.		
	Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6211	

Debtor 1 Dwayne Allen Derring Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Your Employer Identification Number (EIN), if any.		
	(Eliv), ii aliy.	EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		3225 Volunteer Village Way #142 Knoxville, TN 37931	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Knox	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing	Check one:	Check one:
٠.	this district to file for	_	
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case number (if known)

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.								
	choosing to file under	■ Chap	oter 7							
		☐ Chap	oter 11							
		☐ Chap	oter 12							
		☐ Chap								
8.	How you will pay the fee	ab or	out how yo	ou may pay. Typica attorney is submitt	illy, if you are paying the fee yo	with the clerk's office in your local court for mor urself, you may pay with cash, cashier's check, c llf, your attorney may pay with a credit card or ch	or money			
					ments. If you choose this option Dfficial Form 103A).	n, sign and attach the Application for Individuals	to Pay			
		■ Ir bu ap	request that the state of the s	at my fee be waive quired to, waive you ur family size and y	ed (You may request this option or fee, and may do so only if you you are unable to pay the fee in	only if you are filing for Chapter 7. By law, a judur income is less than 150% of the official povert installments). If you choose this option, you mustal Form 103B) and file it with your petition.	y line that			
9.	Have you filed for bankruptcy within the last 8 years?	■ No.								
	lact o youro.	□ 163.	District		When	Case number				
			District		When	Case number				
			District		When	Case number				
10.	Are any bankruptcy cases pending or being filed by a spouse who is	■ No								
	not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.								
			Debtor			Relationship to you				
			District		When	Case number, if known				
			Debtor			Relationship to you				
			District		When	Case number, if known				
11.	Do you rent your residence?	□ No.	Go to	line 12.						
	residence:	Yes.	Has yo	our landlord obtaine	ed an eviction judgment agains	you?				
				No. Go to line 12.						
				Yes. Fill out <i>Initial</i> bankruptcy petitio		ludgment Against You (Form 101A) and file it wit	h this			

Debtor 1 Dwayne Allen Derring

Deb	otor 1	rring			Case number (if known)	
Par	t 3: Report About Any Bu	ısinesses	You Own a	s a Sole Propriet	or	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to P	art 4.		_
		☐ Yes.	Name a	nd location of bus	iness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.	_ 100.	Name o	f business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Number	r, Street, City, Stat	e & ZIP Code	
	it to this petition.		Check t	he appropriate bo	x to describe your business:	
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))	
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))	
				None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S. C. § 1182(1)? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	proceed you are o	under Subc choosing to v statement)(B). I am no	hapter V so that it proceed under Sul and federal incon t filing under Chap	court must know whether you are a small business debtor or a debtor choosing to can set appropriate deadlines. If you indicate that you are a small business debtor or behapter V, you must attach your most recent balance sheet, statement of operations, ne tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C ster 11. 11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Code, and dunder Subchapter V of Chapter 11.	d
		☐ Yes.	I am filir choose	ng under Chapter to proceed under	11, I am a debtor according to the definition in \S 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.	
Par	t 4: Report if You Own or	· Have Any	/ Hazardou	s Property or Any	y Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat	☐ Yes.				
	of imminent and identifiable hazard to	ш res.	What is th	e hazard?		_
	public health or safety? Or do you own any property that needs immediate attention?			te attention is hy is it needed?		_
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?	rishable goods, or estock that must be fed, a building that needs		he property?		
					Number, Street, City, State & Zip Code	

Case 3:23-bk-31941-SHB Doc 1 Filed 11/08/23 Entered 11/08/23 13:29:27 Main Document Page 5 of 53

Debtor 1 **Dwayne Allen Derring** Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether

Part 5:

you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

> I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

П

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Dwayne Allen Der	ring		Case numb	Der (if known)					
Par	t 6: Answer These Quest	ions for Re	eporting Purposes							
	What kind of debts do you have?	16a.		consumer debts? Consumer debts are de rsonal, family, or household purpose."	efined in 11 U.S.C. § 101(8) as "incurred by an					
			☐ No. Go to line 16b.							
			■ Yes. Go to line 17.							
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.							
			☐ No. Go to line 16c.							
			☐ Yes. Go to line 17.							
		16c.	State the type of debts you	owe that are not consumer debts or busine	ess debts					
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.						
	Do you estimate that after any exempt property is excluded and	■ Yes.		Do you estimate that after any exempt provailable to distribute to unsecured creditors	operty is excluded and administrative expenses s?					
	administrative expenses are paid that funds will		■ No							
	be available for distribution to unsecured creditors?		☐ Yes							
18.	How many Creditors do	1 -49		1 ,000-5,000	2 5,001-50,000					
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	<u> </u>					
		☐ 100-19 ☐ 200-99		□ 10,001-25,000	☐ More than100,000					
19.	How much do you estimate your assets to	s 0 - \$5	50,000	□ \$1,000,001 - \$10 million	\$500,000,001 - \$1 billion					
	be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion					
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion					
20.	How much do you estimate your liabilities	S \$0 - \$5		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion					
	to be?		01 - \$100,000 001 - \$500,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion					
		_	001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion					
Par	t7: Sign Below									
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.								
				7, I am aware that I may proceed, if eligible relief available under each chapter, and I d	e, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.					
				not pay or agree to pay someone who is r he notice required by 11 U.S.C. § 342(b).	not an attorney to help me fill out this					
		I request	relief in accordance with the	chapter of title 11, United States Code, sp	ecified in this petition.					
		bankrupto and 3571	cy case can result in fines up	ot, concealing property, or obtaining money to \$250,000, or imprisonment for up to 20	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,					
		Dwayne	vne Allen Derring Allen Derring of Debtor 1	Signature of Debt	tor 2					
		Executed	on November 7, 2023	Executed on						
			MM / DD / YYYY	<u> </u>	M / DD / YYYY					

Case 3:23-bk-31941-SHB Doc 1 Filed 11/08/23 Entered 11/08/23 13:29:27 Desc

Debtor 1 Dwayne Allen De	Main Document	Page 7 of 53 	se number (if known)	
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this peti under Chapter 7, 11, 12, or 13 of title 11, United 5 for which the person is eligible. I also certify that	States Code, and have	explained the relief available under each cl	hapter
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, consciently schedules filed with the petition is incorrect.			
	/s/ Joseph D. McReynolds	Date	November 7, 2023	
	Signature of Attorney for Debtor		MM / DD / YYYY	
	Jaconh D. MaRaynalda 029220			

Joseph D. McReynolds 028229
Printed name Clark & Washington, PC

Firm name

408 S. Northshore Drive Knoxville, TN 37919 Number, Street, City, State & ZIP Code

Contact phone **865-281-8084**

Email address

cwknoxville@cw13.com

028229 TN Bar number & State Certificate Number: 03621-TNE-CC-037918459



CERTIFICATE OF COUNSELING

I CERTIFY that on November 7, 2023, at 10:14 o'clock AM EST, Dwayne A Derring received from Credit Card Management Services, Inc. d/b/a Debthelper.com, an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the Eastern District of Tennessee, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by telephone.

Date: November 7, 2023 By: /s/Wafaa Elmaaroufi

Name: Wafaa Elmaaroufi

Title: Credit Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. 109(h) and 521(b).

EII	l in this info	ormation to identify you	r case:					
	btor 1							
De	DIOI I	Dwayne Allen D First Name	Middle Name		Last Name			
1	btor 2 buse if, filing)	First Name	Middle Name		Last Name			
Uni	ited States E	Bankruptcy Court for the:	EASTERN DISTRICT C	F TEN	NESSEE			
	se number nown)						_	eck if this is an ended filing
Sta Be a info	atemer	e and accurate as poss more space is needed,	Affairs for Indivible. If two married people attach a separate sheet to	are fili	ing together, both are	equally responsible for		
		wn). Answer every que	stion. arital Status and Where Yo	au Live	d Refore			
1.		our current marital statu		ou Live	u Deloie			
	☐ Marrie							
2.	During the	e last 3 years, have you	lived anywhere other than	n where	e you live now?			
	■ No □ Yes. I	List all of the places you l	ived in the last 3 years. Do	not incl	ude where you live now	<i>ı</i> .		
	Debtor 1:		Dates Debtor lived there	1	Debtor 2 Prior Ac	Idress:		Dates Debtor 2 lived there
3. state			ver live with a spouse or le lifornia, Idaho, Louisiana, N					
	■ No □ Yes. I	Make sure you fill out <i>Scl</i>	hedule H: Your Codebtors (Official	Form 106H).			
Pai	rt 2 Exp	lain the Sources of You	r Income					
4.	Fill in the to	otal amount of income yo	nployment or from operati u received from all jobs and have income that you recei	d all bus	sinesses, including part	-time activities.	s calend	lar years?
	■ No □ Yes. I	Fill in the details.						
			Debtor 1			Debtor 2		
			Sources of income Check all that apply.	(be	ross income efore deductions and clusions)	Sources of income Check all that apply.		Gross income (before deductions and exclusions)

Case 3:23-bk-31941-SHB Doc 1 Filed 11/08/23 Entered 11/08/23 13:29:27 Desc Main Document Page 10 of 53

Debtor 1 Dwayne Allen Derring Case number (if known)

5.	Include in and other	come regard public bene	lless of wheth fit payments;	er that income is taxable. pensions; rental income; ir	wo previous calendar years Examples of other income are terest; dividends; money colle at you received together, list it	alimony; child supp ected from lawsuits;	royalties; and	
	List each	source and t	he gross inco	me from each source sepa	arately. Do not include income	that you listed in lir	ie 4.	
	□ No							
	_	Fill in the de	etails.					
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
		y 1 of curre filed for bar	nt year until nkruptcy:	Social Security	\$12,254.00			
				Food Stamps	\$1,848.00			
	r last caler anuary 1 to	ndar year: December	31, 2022)	Social Security	\$13,368.00			
				Food Stamps	\$2,640.00			
		dar year be December		Social Security	\$13,368.00			
				Food Stamps	\$2,640.00			
Da	rt 3: Lis	t Cartain Ba	wmonto Vou	Made Before You Filed f	or Pankruptov			
га	<u> </u>							
õ.	Are eithe ☐ No.	Neither D	ebtor 1 nor D	's debts primarily consur ebtor 2 has primarily con personal, family, or house	nsumer debts. Consumer del	ots are defined in 11	U.S.C. § 101	(8) as "incurred by an
		During the	90 davs befo	re vou filed for bankruptcy	did you pay any creditor a to	tal of \$7.575* or mo	re?	
		□ No.	Go to line 7			. ,		
		☐ Yes	paid that cre		paid a total of \$7,575* or more nents for domestic support oblants hankruptov case			
		* Subject			ears after that for cases filed o	n or after the date o	f adjustment.	
	Yes.			r both have primarily cor re you filed for bankruptcy	sumer debts. did you pay any creditor a to	al of \$600 or more?	,	
		■ No.	Go to line 7					
		□ Yes	include pay		paid a total of \$600 or more a t obligations, such as child su			
	Creditor	's Name and	d Address	Dates of pay		Amount you	Was this p	ayment for
					paid	still owe		

Case number (if known)

7.	Within 1 year before you filed for bankrup Insiders include your relatives; any general p of which you are an officer, director, person in a business you operate as a sole proprietor. alimony.	partners; relatives of any ge n control, or owner of 20%	eneral partners; partners or more of their voting	erships of which yo g securities; and a	ou are a general ny managing age	partner; corporations ent, including one fo
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	nis payment
В.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co		yments or transfer a	any property on a	ccount of a deb	ot that benefited an
	■ No□ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include creditor	
Pa	rt 4: Identify Legal Actions, Repossessio	ons, and Foreclosures				
9.	Within 1 year before you filed for bankrup: List all such matters, including personal injury modifications, and contract disputes.					
	■ No □ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	case
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details belo		perty repossessed, f	oreclosed, garnis	shed, attached,	seized, or levied?
	No. Go to line 11.Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property Explain what happene		Date		Value of the property
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed No Yes. Fill in the details.	 uptcy, did any creditor, in		nancial institutior	ı, set off any am	nounts from your
	Creditor Name and Address	Describe the action th	ne creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or a		perty in the possess			t of creditors, a
	■ No □ Yes					
Pai	rt 5: List Certain Gifts and Contributions	3				
13.	Within 2 years before you filed for bankru	ptcy, did you give any gif	its with a total value	of more than \$60	0 per person?	
	☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts	s	Date: the g	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:					

Debtor 1 Dwayne Allen Derring

Case 3:23-bk-31941-SHB Doc 1 Filed 11/08/23 Entered 11/08/23 13:29:27 Main Document Page 12 of 53 Debtor 1 Dwayne Allen Derring Case number (if known) 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο п Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Nο Yes. Fill in the details. Person Who Received Transfer Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

Description and value of the property transferred

Date Transfer was

made

Nο

Name of trust

Yes. Fill in the details.

Debtor 1 Dwayne Allen Derring

Case number (if known)

Pa	rt 8:	List of Certain Financial Accounts, Ir	strun	nents, Safe Depos	it Boxes, and Sto	orage Unit	s				
20.	sol Inc	hin 1 year before you filed for bankrupt d, moved, or transferred? lude checking, savings, money market, uses, pension funds, cooperatives, asso	or oth	ner financial acco	unts; certificates	of deposi		,			
		No Yes, Fill in the details.	Ciatic	ons, and other find	inciai institutions	.					
					_		_				
		ime of Financial Institution and Idress (Number, Street, City, State and ZIP de)		et 4 digits of count number	Type of accou instrument	int or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?										
		No									
		Yes. Fill in the details.									
		Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)					Do you still have it?				
22.	Hav	ve you stored property in a storage unit	or pla	ace other than you	ır home within 1	year befor	re you filed for bankruptc	y?			
	■ No										
		Yes. Fill in the details.									
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City,							•			
				State and ZIP Code)							
Pa	rt 9:	Identify Property You Hold or Contro	l for S	Someone Else							
23.		you hold or control any property that so someone.	omeoi	ne else owns? Inc	lude any propert	y you bori	rowed from, are storing fo	or, or hold in trust			
	_										
	_	No									
		Yes. Fill in the details.									
		vner's Name Idress (Number, Street, City, State and ZIP Code)		Where is the property? (Number, Street, City, State and ZIP Code) Desc			the property	Value			
Pa	rt 10	Give Details About Environmental In	forma	tion							
For	the	purpose of Part 10, the following definit	ions a	apply:							
	tox	vironmental law means any federal, stat ic substances, wastes, or material into sulations controlling the cleanup of thes	the ai	r, land, soil, surfa	ce water, ground	• .	-				
		e means any location, facility, or proper own, operate, or utilize it, including disp	-		environmental la	aw, wheth	er you now own, operate	, or utilize it or used			
	Haz	zardous material means anything an envardous material, pollutant, contaminant	vironn	nental law defines	as a hazardous	waste, ha	zardous substance, toxic	substance,			
Rep	ort a	all notices, releases, and proceedings th	nat yo	u know about, reç	ardless of when	they occu	ırred.				
24.	Has	s any governmental unit notified you tha	at you	may be liable or	ootentially liable	under or i	n violation of an environr	mental law?			
		No									
		No									
		Yes. Fill in the details.						_			
		Ime of site Idress (Number, Street, City, State and ZIP Code)		Governmental u Address (Number, ZIP Code)	nit Street, City, State and		onmental law, if you it	Date of notice			

Case number (if known) Debtor 1 Dwayne Allen Derring

		Name of Person Attach the Bankru	uptcy Petition Preparer's Notice, Declarationent of Financial Affairs for Individuals Filing	,	page
Did y ■ N		pay or agree to pay someone who is no	t an attorney to help you fill out bankru	ptcy forms?	
■ N □ Y					
-		attach additional pages to Your Statem	ent of Financial Affairs for Individuals F	illing for Bankruptcy (Official Form	107)?
Sig		ure of Debtor 1 November 7, 2023	Date		
Dw	ayı	ayne Allen Derring ne Allen Derring	Signature of Debtor 2		
are t with	rue a b	ead the answers on this <i>Statement of Fi</i> and correct. I understand that making a bankruptcy case can result in fines up to C. §§ 152, 1341, 1519, and 3571.	false statement, concealing property, o	or obtaining money or property by f	
		Sign Below			
	A	ame ddress umber, Street, City, State and ZIP Code)	Date Issued		
		No Yes. Fill in the details below.			
28.		thin 2 years before you filed for bankrup titutions, creditors, or other parties.	tcy, did you give a financial statement t	o anyone about your business? Inc	lude all financial
		cidress umber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security Dates business existed	number or ITIN.
	В	usiness Name	Describe the nature of the business	Employer Identification numb	
			I in the details below for each business		
		No. None of the above applies. Go to			
		_	ng or equity securities of a corporation		
		☐ An officer, director, or managing ex	secutive of a corporation		
		☐ A partner in a partnership	party (CEO) or infinited hability partiters in	p (cc.)	
		_	pany (LLC) or limited liability partnershi	·	
21.	**1	_ ` .	in a trade, profession, or other activity,	,	ly busilless:
		thin 4 years before you filed for bankrup	· · · · · · · · · · · · · · · · · · ·	y of the following connections to a	w husiness?
Par	¥Ľ	: Give Details About Your Business or	State and ZIP Code) Connections to Any Rusiness		
		ase Title ase Number	Court or agency Name Address (Number, Street, City,	Nature of the case	Status of the case
		No Yes. Fill in the details.			
26.	На	ve you been a party in any judicial or ad	ministrative proceeding under any envi	ronmental law? Include settlements	and orders.
		ame of site ddress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
		Yes. Fill in the details.			
		No			
25.	На	ve you notified any governmental unit of	f any release of hazardous material?		

Debtor 1 Dwayne Allen Derring

Case number (if known)

Case 3:23-bk-31941-SHB Doc 1 Filed 11/08/23 Entered 11/08/23 13:29:27 Desc Main Document Page 16 of 53

Fill in this infor	mation to identify your	case:			
Debtor 1	Dwayne Allen De	rring			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	DF TENNESSEE		
Case number (if known)				☐ Check if this is amended filing	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Pa	t 1: Summarize Your Assets		
		Your as Value o	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	640.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	640.00
Pa	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	16,051.70
	Your total liabilities	\$	16,051.70
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,282.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,270.00
Pa	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a nersonal	family or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

Case 3:23-bk-31941-SHB Doc 1 Filed 11/08/23 Entered 11/08/23 13:29:27 Desc Main Document Page 17 of 53

Debtor 1 Dwayne Allen Derring

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____168.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Case 3:23-bk-31941-SHB Doc 1 Filed 11/08/23 Entered 11/08/23 13:29:27 Desc Main Document Page 18 of 53

		Main Docun	nent Page 18 of 53	
Fill in this infor	mation to identify your	case and this filing:		
Debtor 1	Dwayne Allen De	errina		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
, ,				
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF	TENNESSEE	
Case number				☐ Check if this is an
				amended filing
Official Fo	rm 106A/B			
Schedul	e A/B: Prop	ertv		12/15
	-		nce. If an asset fits in more than one category, list the	
think it fits best. B	Be as complete and accura	ate as possible. If two married	d people are filing together, both are equally responsi	ble for supplying correct
information. If mor Answer every ques		a separate sneet to this form	n. On the top of any additional pages, write your name	and case number (if known).
Part 1: Describe	Each Residence, Building	g. Land. or Other Real Estate	You Own or Have an Interest In	
1. Do you own or	have any legal or equitabl	e interest in any residence, b	uilding, land, or similar property?	
No. Go to Pa	rt 2.			
☐ Yes. Where i	is the property?			
Part 2: Describe	Your Vehicles			
			icles, whether they are registered or not? Include G: Executory Contracts and Unexpired Leases.	de any vehicles you own that
someone eise un	ves. Il you lease a verilo	e, also report it on <i>scriedul</i>	ie G. Executory Contracts and Oriexpired Leases.	
3. Cars, vans, tr	ucks, tractors, sport u	tility vehicles, motorcycle	s	
■ No				
□ Yes				
4. Watercraft. ai	ircraft. motor homes. A	TVs and other recreation:	al vehicles, other vehicles, and accessories	
			sels, snowmobiles, motorcycle accessories	
■ No				
■ No □ Yes				
□ Tes				
5 Add the dolla	ar value of the portion	you own for all of your en	tries from Part 2, including any entries for	\$0.00
pages you h	ave attached for Part 2	Write that number here	=>	
Part 3: Describe	Your Personal and Hous	ahald Itams		
		able interest in any of the	following items?	Current value of the
·		·	•	portion you own?
				Do not deduct secured claims or exemptions.
	oods and furnishings	linone china kitchenwere		
□ No	ajoi appiiances, turniture	, linens, china, kitchenware	;	
Yes. Desc	ribe			
	2 Dresser	s, Bed		\$275.00

D	ebtor 1	Dwayne Alle	n Derring Case number (if	known)
7.	□ No	es: Televisions ar	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; phones, cameras, media players, games	music collections; electronic devices
	_ 100.	20001120	Cell Phone, 1 TV, DVD Player	\$175.00
8.	Example No		figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamons, memorabilia, collectibles	np, coin, or baseball card collections;
9.	Equipme Example	ent for sports ar	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; of	canoes and kayaks; carpentry tools;
10.	■ No		s, shotguns, ammunition, and related equipment	
11.	□ No		othes, furs, leather coats, designer wear, shoes, accessories	
			Personal Clothing	\$150.00
12.	□ No		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, Navy Ring	gems, gold, silver
13.	Examp ■ No	rm animals oles: Dogs, cats, b	pirds, horses	
14.	■ No	her personal and	d household items you did not already list, including any health aids you did no	t list
15			of all of your entries from Part 3, including any entries for pages you have attacl number here	sed \$620.00
		scribe Your Financ		
D	o you ow	n or have any le	egal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash			

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No

Official Form 106A/B Schedule A/B: Property page 2

Case 3:23-bk-31941-SHB Doc 1 Filed 11/08/23 Entered 11/08/23 13:29:27 Main Document Page 20 of 53 Debtor 1 **Dwayne Allen Derring** Case number (if known) Yes..... Cash \$20.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... \$0.00 17.1. Checking **Truist** 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... % of ownership: Name of entity: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. No Issuer name and description. ☐ Yes..... 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No

21. Retirement or pension accounts 22. Security deposits and prepayments 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them...

Entered 11/08/23 13:29:27 Case 3:23-bk-31941-SHB Doc 1 Main Document Page 21 of 53 Debtor 1 **Dwayne Allen Derring** Case number (if known) 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information...... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list No \square Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$20.00 for Part 4. Write that number here...... Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6.

Filed 11/08/23

☐ Yes. Go to line 38.

Case 3:23-bk-31941-SHB Doc 1 Filed 11/08/23 Entered 11/08/23 13:29:27 Page 22 of 53 Main Document Debtor 1 **Dwayne Allen Derring** Case number (if known) Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. Part 6: If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 56. \$0.00 Part 3: Total personal and household items, line 15 57. \$620.00 Part 4: Total financial assets, line 36 58. \$20.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00

\$640.00

Copy personal property total

\$640.00

\$640.00

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

Official Form 106A/B Schedule A/B: Property page 5

Case 3:23-bk-31941-SHB Doc 1 Filed 11/08/23 Entered 11/08/23 13:29:27 Page 23 of 53 Main Document

Fill in this inform	Fill in this information to identify your case:						
Debtor 1	Dwayne Allen De	rring					
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	inkruptcy Court for the:	EASTERN DISTRICT C	OF TENNESSEE				
Case number _ (if known)					☐ Check if this is an amended filing		

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	Part 1: Identify the Property You Claim as Exempt					
1.	Which set of exemptions are you claiming	? Check one only, ever	n if your spouse is filing with you.			
	■ You are claiming state and federal nonbar	nkruptcy exemptions. 1	11 U.S.C. § 522(b)(3)			
	☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)					
2.	For any property you list on Schedule A/B	that you claim as exe	empt, fill in the information below.			
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption		
		Copy the value from Schedule A/B	Check only one box for each exemption.			
	2 Dressers, Bed Line from Schedule A/B: 6.1	\$275.00	\$275.00	Tenn. Code Ann. § 26-2-103		
	Line nom Schedule AVB. U. I		100% of fair market value, up to			

	Scriedule A/D		
2 Dressers, Bed Line from Schedule A/B: 6.1	\$275.00	\$275.00	Tenn. Code Ann. § 26-2-103
Ellio II oli i		100% of fair market value, up to any applicable statutory limit	
Cell Phone, 1 TV, DVD Player Line from Schedule A/B: 7.1	\$175.00	\$175.00	Tenn. Code Ann. § 26-2-103
Line from Scneaule A/B: 1.1		100% of fair market value, up to any applicable statutory limit	
Personal Clothing Line from Schedule A/B: 11.1	\$150.00	\$150.00	Tenn. Code Ann. § 26-2-104
Ellie IIolii Genedale Av.B. 1111		100% of fair market value, up to any applicable statutory limit	
Navy Ring Line from Schedule A/B: 12.1	\$20.00	\$20.00	Tenn. Code Ann. § 26-2-103
Line from Schedule PVD. 12.1		100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$20.00	\$20.00	Tenn. Code Ann. § 26-2-103
Line nom <i>Schedule AVB</i> . 10.1		100% of fair market value, up to	

any applicable statutory limit

Debtor	1 D w	vayne Allen Derring	Case number (if known)	
	•	claiming a homestead exemption of more than \$189,050? to adjustment on 4/01/25 and every 3 years after that for cases filed on c	r after the date of adjustment.)	
	No			
	Yes.	Did you acquire the property covered by the exemption within 1,215 day	ys before you filed this case?	
		No		
		Yes		

Case 3:23-bk-31941-SHB Doc 1 Filed 11/08/23 Entered 11/08/23 13:29:27 Desc Main Document Page 25 of 53

Fill in this information to identify your case:					
Debtor 1	Dwayne Allen De	rring			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	FTENNESSEE		
Case number (if known)				☐ Check if this is an amended filing	

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

		Main Docum	ent Pag	e 26 of 53		
Fill in this infor	mation to identify your	case:				
Debtor 1	Dwayne Allen Der	ring				
Bester 1	First Name	Middle Name	Last Name		_	
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF	TENNESSEE		_	
Cooo number						
Case number (if known)					пс	heck if this is an
					_	mended filing
Official For						
Schedule I	E/F: Creditors W	ho Have Unsecur	<u>ed Claims</u>			12/15
Schedule G: Exec Schedule D: Credi	utory Contracts and Unexpitors Who Have Claims Secontinuation Page to this pag	that could result in a claim. A ired Leases (Official Form 106 ured by Property. If more space e. If you have no information to	G). Do not includ se is needed, cop	e any creditors with part y the Part you need, fill it	ially secured claims out, number the en	that are listed in tries in the boxes on the
Part 1: List A	All of Your PRIORITY Un	secured Claims				
1. Do any credit	tors have priority unsecure	d claims against you?				
No. Go to	Part 2.					
☐ Yes.						
David College	All - (V NONDDIODIT	V. I.I				
	All of Your NONPRIORIT					
3. Do any credi	tors have nonpriority unsec	ured claims against you?				
☐ No. You ha	ave nothing to report in this pa	art. Submit this form to the court	with your other sc	hedules.		
Yes.						
4. List all of you	ur nonnriority unsecured cla	aims in the alphabetical order	of the creditor w	ho holds each claim If a	creditor has more tha	n one nonnriority
unsecured cla	aim, list the creditor separately	for each claim. For each claim	listed, identify wha	t type of claim it is. Do not	list claims already inc	luded in Part 1. If more
Part 2.	illor noids a particular claim, il	st the other creditors in Part 3.If	you have more tha	an three nonphonty unsect	ired claims illi out the	Continuation Page of
						Total claim
4.1 Advan	ce America	Last 4 digits of	f account numbe	r		\$0.00
•	ity Creditor's Name	NATI	1.1.4.1			
	Vestern Avenue ille, TN 37921	when was the	debt incurred?	2020		-
	Street City State Zip Code	As of the date	you file, the clain	is: Check all that apply		
Who inc	urred the debt? Check one.					
■ Debto	or 1 only	☐ Contingent				
☐ Debto	or 2 only	☐ Unliquidated	d			
☐ Debto	or 1 and Debtor 2 only	☐ Disputed				
	ast one of the debtors and and	_ '	RIORITY unsecur	ed claim:		
	k if this claim is for a comr		ns			
debt		☐ Obligations		paration agreement or divo	rce that you did not	
	aim subject to offset?	report as priorit	•			
■ No		·	-	ing plans, and other simila	r debts	
☐ Yes		Other. Spec	ify Notice On	ly		

Case 3:23-bk-31941-SHB Doc 1 Filed 11/08/23 Entered 11/08/23 13:29:27 Desc Main Document Page 27 of 53

Depto	Dwayne Allen Derring	Case number (if known)	
4.2	AFNI	Last 4 digits of account number	\$124.21
	Nonpriority Creditor's Name PO Box 3097	When was the debt incurred? 2020	
	Bloomington, IL 61702 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneon an that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collections	
4.3	Bulwark Exterminating, LLC Nonpriority Creditor's Name	Last 4 digits of account number	\$110.00
	P.O Box 2180 Queen Creek, AZ 85142	When was the debt incurred? 2018	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collections	
4.4	Check Into Cash	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name 361 South Illinois Avenue Oak Ridge, TN 37830	When was the debt incurred? 2020	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other Specify Notice Only	

Debt	or 1 Dwayne Allen Derring	Case number (if known)	
4.5	Convergent Outsourcing	Last 4 digits of account number	\$693.34
	Nonpriority Creditor's Name 500 SW 7th St Building A 100 Renton, WA 98055-2983	When was the debt incurred? 2020	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
4.6	Fingerhut/ Web Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$186.00
	6250 Ridgewood Road Saint Cloud, MN 56303	When was the debt incurred? 2023	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Credit Card	
4.7	First National Cradit Cord CMC	Local A digita of account number	¢524.00
4.7	First National Credit Card CMC Nonpriority Creditor's Name 500 E. 60th St. N.	Last 4 digits of account number When was the debt incurred? 2016	\$534.00
	Sioux Falls, SD 57104 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam is. Oneck an that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	<u> </u>	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other, Specify Credit Card	

Debtor	1 Dwayne Allen Derring	Case number (if known)			
4.8	First Premier	Last 4 digits of account number	\$717.00		
	Nonpriority Creditor's Name 3820 N Louise Avenue Sioux Falls, SD 57107	When was the debt incurred? 2023			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Credit Card			
4.9	First Savings Bank/Blaze	Last 4 digits of account number	\$494.00		
	Nonpriority Creditor's Name PO Box 5065 Sioux Falls, SD 57117-5065	When was the debt incurred? 2016			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Credit Card			
4.1	Fort Sanders Regional Medical Ctr.	Last 4 digits of account number	\$3,105.00		
	Nonpriority Creditor's Name 1420 Centerpoint Blvd., Bldg C.	When was the debt incurred? 2020			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	_	-			
	Debtor 1 only	Contingent			
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	Other Specify Medical			

Case 3:23-bk-31941-SHB Doc 1 Filed 11/08/23 Entered 11/08/23 13:29:27 Desc Main Document Page 30 of 53

Deb	tor 1 Dwayne Allen Derring	Case number (if known)		
4.1 1	FSNB N.A.	Last 4 digits of account number	\$600.00	
-	Nonpriority Creditor's Name 511 SW A Avenue Lawton, OK 73501	When was the debt incurred? 2022		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
		☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	Other. Specify NSF		
4.1 2	Humana	Last 4 digits of account number	\$16.65	
	Nonpriority Creditor's Name		· ·	
	PO Box 14601 Lexington, KY 40512-4601	When was the debt incurred? 2020		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	□ Yes	■ Other. Specify Medical		
4.1	1			
3	Ingenio	Last 4 digits of account number	\$0.00	
	Nonpriority Creditor's Name PO Box San Antonio, TX 78265	When was the debt incurred? 2020		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	At least one of the debtors and another Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not		
		report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
	■ No			
	☐ Yes	■ Other. Specify Notice Only		

Dwayne Allen Derring	Case number (if known)	
Knoxville HMA Cardiology	Last 4 digits of account number	\$43.32
Nonpriority Creditor's Name		
PO Box 79951	When was the debt incurred? 2020	
Baltimore, MD 21279 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
Mason Easy Pay	Last 4 digits of account number	\$0.00
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ0.00
P.O. Box 77001	When was the debt incurred? 2020	
Madison, WI 53707-1001	- As fall land of the district of the state	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Notice Only	
McKesson Patient Care Solutions	Last 4 digits of account number	\$62.61
Nonpriority Creditor's Name		Ψ02.01
PO Box 645034	When was the debt incurred? 2018	
Pittsburgh, PA 15264 Number Street City State Zip Code	As of the date you file the elements Object of the state of the	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	Поли	
	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	_ *****	
Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes		
— 163	Other. Specify Medical	

Case 3:23-bk-31941-SHB Doc 1 Filed 11/08/23 Entered 11/08/23 13:29:27 Desc Main Document Page 32 of 53

Dwayne Allen Derring Case number (if known)

Den	Dwayne Allen Derring	Case number (ii known)	
4.1 7	Methodist Medical Center	Last 4 digits of account number	\$1,090.00
	Nonpriority Creditor's Name Knoxville Business Office Bldg. C 1420 Centerpoint Blvd. Knoxville, TN 37932	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
4.1 8	Midland Credit Management Nonpriority Creditor's Name	Last 4 digits of account number	\$353.00
	2365 Northside Drive #300 San Diego, CA 92108-2709	When was the debt incurred? 2019	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill\Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collections	
4.1 9	Nationwide Credit, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	\$297.00
	PO Box 26314 Lehigh Valley, PA 18002	When was the debt incurred? 2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Πyes	Other Specific Collections	

Case 3:23-bk-31941-SHB Doc 1 Filed 11/08/23 Entered 11/08/23 13:29:27 Desc Main Document Page 33 of 53

Dwayne Allen Derring Case number (if known)

Debt	Dwayne Allen Derning	Case Humber (ii known)	
4.2 0	Parkwest Medical Center	Last 4 digits of account number	\$1,305.00
	Nonpriority Creditor's Name Knoxville Business Office Service 1420 Centerpointe Blvd Building C Knoxville, TN 37932	When was the debt incurred? 2020	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Control of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset? ————————————————————————————————————	$\hfill \square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No □ Yes	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Medical	
		- Other, Specify	
4.2 1	Portfolio Recovery Associates Nonpriority Creditor's Name	Last 4 digits of account number	\$1,048.20
	120 Corporate Blvd., Ste 100 Norfolk, VA 23502	When was the debt incurred? 2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collections	
4.2 2	Premier Surgical Assoc	Last 4 digits of account number	\$230.30
	Nonpriority Creditor's Name P.O. Box 1512 Knoxville, TN 37901	When was the debt incurred? 2021	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical	

	Professional Account Services, Inc.	Last 4 digits of account number	\$166.00
	Nonpriority Creditor's Name PO Box 188	When was the debt incurred? 2018	
	Brentwood, TN 37024 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
_	Quest Diagnostics	Last 4 digits of account number	\$34.78
	Nonpriority Creditor's Name	Last 4 digits of account number	ψο-1.1 σ
	PO Box 740777	When was the debt incurred? 2020	
	Cincinnati, OH 45274 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam is. Offeck an that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	lacktriangle Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
	Recievables Performance	Look A divite of account number	\$0.00
	Management Nonpriority Creditor's Name	Last 4 digits of account number	Ψ0.00
	PO Box 1548	When was the debt incurred? 2020	
	Lynnwood, WA 98046 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Notice Only	

Case 3:23-bk-31941-SHB Doc 1 Filed 11/08/23 Entered 11/08/23 13:29:27 Desc Main Document Page 35 of 53

Dwayne Allen Derring Case number (if known)

Report Inc	Last 4 digits of account number	\$996
Nonpriority Creditor's Name P.O. Box 10305	When was the debt incurred? 2019	
Knoxville, TN 37939-0305	when was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Collections	
Security Finance	Last 4 digits of account number	\$73!
Nonpriority Creditor's Name		Ψ. σ.
PO Box 3146	When was the debt incurred? 2018	
Spartanburg, SC 29304	=	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
• • • • • • • • • • • • • • • • • • •	☐ Debts to pension or profit-sharing plans, and other similar debts	
■ No	_	
Yes	Other. Specify Loan	
Sunrise Credit Services	Last 4 digits of account number	\$22
Nonpriority Creditor's Name P.O. Box 9100	When we the debt incorred? 2016	
Farmingdale, NY 11735	When was the debt incurred? 2016	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Collections	

Debto	Dwayne Allen Derring	Case number (if known)			
4.2	Tennova Turkey Creek Medical Center	Last 4 digits of account number		\$1,960.00	
	Nonpriority Creditor's Name PO Box 188 Brentwood, TN 37024	When was the debt incurred?	2018		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts		
	Yes	Other. Specify Medical			
4.3	The Danbury Mint			\$171.30	
0	Nonpriority Creditor's Name	Last 4 digits of account number		\$171.30	
	PO Box 371323 Pittsburgh, PA 15250	When was the debt incurred?	2020		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts		
	Yes	Other. Specify Collection			
4.3	The Endoscopy Center	Look & digito of account number		\$150.00	
1	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ130.00	
	1311 Dowell Spring Blve. Ste 200 Knoxville, TN 37909-2707	When was the debt incurred?	2020		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	\square At least one of the debtors and another				
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts		
	□ Yes	Other Specify Medical			

Dwayne Allen Derring	Case number (if known)					
		*				
US Bank	Last 4 digits of account number	\$30.00				
Nonpriority Creditor's Name 10626 Hardin Valley Road Knoxville, TN 37931	When was the debt incurred? 2018					
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
Who incurred the debt? Check one.						
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community	☐ Student loans					
debt	Obligations arising out of a separation agreement or divorce that you did not					
Is the claim subject to offset?	report as priority claims					
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
Yes	Other. Specify NSF					
Wakefield and Associates	Last 4 digits of account number	\$0.00				
Nonpriority Creditor's Name		*****				
PO Box 50250	When was the debt incurred? 2020					
Knoxville, TN 37950-0250 Number Street City State Zip Code	As of the date year file the claim in Observation that					
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
■ Debtor 1 only	□ Continued					
	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:					
At least one of the debtors and another	Student loans					
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not					
Is the claim subject to offset?	report as priority claims					
■ No	Debts to pension or profit-sharing plans, and other similar debts					
☐ Yes	■ Other. Specify Notice Only					
Xfinity	Last 4 digits of account number	\$573.00				
Nonpriority Creditor's Name PO Box 2127	When was the debt incurred? Multiple					
Norcross, GA 30091-2127	muniple					
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
Who incurred the debt? Check one.						
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community	☐ Student loans					
debt	Obligations arising out of a separation agreement or divorce that you did not					
Is the claim subject to offset?	report as priority claims					
■ No	Debts to pension or profit-sharing plans, and other similar debts					
☐ Yes	■ Other. Specify Cable Services					

Part 3: List Others to Be Notified About a Debt That You Already Listed

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 3:23-bk-31941-SHB Doc 1 Filed 11/08/23 Entered 11/08/23 13:29:27 Desc Main Document Page 38 of 53

Debtor 1 Dwayne Allen Derring		Case number (if known)				
Knox County General Sessions Court Attn Wanda 300 Main Street Room 318 Knoxville, TN 37902	Line 4.21 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims				
,	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2	2 did you list the original creditor?				
Nathan L Horton Esquire	Line 4.21 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims				
140 Corporate Blvd Norfolk, VA 23502		■ Part 2: Creditors with Nonpriority Unsecured Claims				
NOTIOIR, VA 23302	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2	2 did you list the original creditor?				
The Endoscopty Center West	Line 4.31 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
PO Box 59002 Knoxville, TN 37950		■ Part 2: Creditors with Nonpriority Unsecured Claims				
,,	Last 4 digits of account number					

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		0.00
		you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 16,051.70
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 16,051.70

Case 3:23-bk-31941-SHB Doc 1 Filed 11/08/23 Entered 11/08/23 13:29:27 Des Main Document Page 39 of 53

Fill in this information to identify your case:					
Debtor 1	Dwayne Allen De	rring			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F TENNESSEE		
Case number					
(if known)					

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3			<u> </u>	<u> </u>	
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	_
			·	·	

Case 3:23-bk-31941-SHB Doc 1 Filed 11/08/23 Entered 11/08/23 13:29:27 Desc Main Document Page 40 of 53

Fill in this	information to identify your	r case:	ment rage +	
Debtor 1	Dwayne Allen De	erring		
Dobtor 2	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filin	ng) First Name	Middle Name	Last Name	
United Staf	tes Bankruptcy Court for the:	EASTERN DISTRICT (OF TENNESSEE	
Case numb (if known)	ber			☐ Check if this is an amended filing
	l Form 106H lule H: Your Cod	lebtors		12/15
people are ill it out, ar our name	filing together, both are equ nd number the entries in the and case number (if known	ually responsible for sup e boxes on the left. Attack i). Answer every question	plying correct informat h the Additional Page t n.	s complete and accurate as possible. If two married ion. If more space is needed, copy the Additional Page, o this page. On the top of any Additional Pages, write
1. Do y	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.
■ No □ Yes	;			
Arizona No.	a, California, Idaho, Louisiana Go to line 3.	a, Nevada, New Mexico, Pu	uerto Rico, Texas, Wash	y? (Community property states and territories include ington, and Wisconsin.)
3. In Colu in line Form	2 again as a codebtor only	otors. Do not include you if that person is a guarar	r spouse as a codebtor ntor or cosigner. Make	if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Officia 16G). Use Schedule D, Schedule E/F, or Schedule G to fi
	Column 1: Your codebtor Name, Number, Street, City, State and 2	ZIP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
-	Name Number Street City	State	ZIP Code	☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line
3.2	Name			Schedule D, line
·				☐ Schedule E/F, line
	Number Street City	State	ZIP Code	_

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

						_				
Fill	in this information to identify your of	case:								
Del	btor 1 Dwayne All	en Derring			_					
	btor 2				_					
Uni	ited States Bankruptcy Court for the	e: EASTERN DISTRICT	OF TENNESSEE		_					
O Se a sup	fficial Form 106l chedule I: Your Inc as complete and accurate as poseplying correct information. If you	sible. If two married peo	ng jointly, and your	spouse i	s liv	A A A A A A A A A A A A A A A A A A A	3 income //M / DD/ \(\) otor 2), bo you, incl	ed filing ent show as of the YYYY th are edude info	rmation about	12/15 ible for your
spo atta	use. If you are separated and youch a separate sheet to this form. It 1: Describe Employment	ur spouse is not filing wi On the top of any additi	th you, do not inclu	de inforn	natio	on abou	t your spo	ouse. If r	nore space is	needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-	filing spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	☐ Employed ■ Not employed				☐ Empl	oyed mployed		
	employers. Include part-time, seasonal, or self-employed work.	Occupation Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed the	here?				_			
Pa	rt 2: Give Details About Mo	nthly Income								
	imate monthly income as of the ouse unless you are separated.	late you file this form. If	you have nothing to r	eport for a	any l	line, write	e \$0 in the	space. I	nclude your noi	n-filing
,	ou or your non-filing spouse have mee space, attach a separate sheet to		ombine the informatio	n for all e	mplo	oyers for	that perso	on on the	lines below. If	you need
						For De	btor 1		ebtor 2 or iling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add l	ne 2 + line 3.		4.	\$		0.00	\$	N/A	

Deb	tor 1	Dwayne Allen Derring	-	С	ase number (if kr	nown)			
					For Debtor 1			Debtor 2 or -filing spouse	
	Cop	by line 4 here	4.		\$ C	0.00	\$	N/A	<u>\</u>
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$ 0	0.00	\$	N/A	١
	5b.	Mandatory contributions for retirement plans	5b.		· — -	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.		. —	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.		\$ <u> </u>	0.00	\$	N/A	<u></u>
	5e.	Insurance	5e.		\$ 0	0.00	\$	N/ <i>A</i>	1
	5f.	Domestic support obligations	5f.			0.00	\$	N/A	
	5g.	Union dues	5g.			0.00	\$	N/A	
	5h.	Other deductions. Specify:	_ 5h.	.+	\$ C	0.00	+ \$	N/A	<u>\</u>
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	9		0.00	\$	N/A	<u>\</u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	5	§	0.00	\$	N/A	<u>\</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.		·	0.00	\$ -	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce			* ·		-	147	<u> </u>
		settlement, and property settlement.	8c.		\$ C	0.00	\$	N/A	<u>\</u>
	8d.	Unemployment compensation	8d.			0.00	\$	N/A	
	8e.	Social Security	8e.		\$1,114	.00	\$	N/A	<u>\</u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Food Stamps	8f.		\$ 168	3.00	\$	N/A	A
	8g.	Pension or retirement income	 8g.		\$	0.00	\$	N/A	-
	8h.	Other monthly income. Specify:	8h.	.+	\$	0.00	+ \$	N/A	1
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,282	2.00	\$	N/	' A
10.			10.	\$	1,282.00	+ \$_		N/A = \$	1,282.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.							
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your refriends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe				•	Schedule J. 11. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies						12. \$ Comb	
12	Do :	you expect an increase or decrease within the year after you file this form	2					month	nly income
13.	■	you expect an increase or decrease within the year after you file this form No.	·						
		Yes. Explain: Debtor Recieved Social Security and Food Stam	os w	hic	h do not var	y			

Official Form 106l Schedule I: Your Income page 2

Fill in this info	rmation to identify your case:				
Debtor 1	Dwayne Allen Derring		Check	c if this is:	
	Dwayne Allen berning			An amended filing	
Debtor 2 (Spouse, if filing					ving postpetition chapter the following date:
	,		_	·	
United States Ba	ankruptcy Court for the: EASTERN DISTRICT OF TENNE	SSEE		MM / DD / YYYY	
Case number (If known)					
Official I	Form 106J				
Schedu	lle J: Your Expenses				12/15
information. I	ete and accurate as possible. If two married people a If more space is needed, attach another sheet to this nown). Answer every question.				
	escribe Your Household				
	joint case?				
	to to line 2. Does Debtor 2 live in a separate household?				
	No				
	☐ No ☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Debto	or 2.	
2. Do vou h	nave dependents?				
•		Dependent's relati	ionshin to	Dependent's	Does dependent
Debtor 2.	□ 1C3.	Debtor 1 or Debto		age	live with you?
Do not st					□ No
depende	nts names.				☐ Yes ☐ No
					⊔ No □ Yes
					□ No
					☐ Yes
					□ No
					☐ Yes
•	expenses include No				
	and your dependents?				
Part 2: Es	stimate Your Ongoing Monthly Expenses				
Estimate you	r expenses as of your bankruptcy filing date unless y of a date after the bankruptcy is filed. If this is a supp				
	nses paid for with non-cash government assistance i				
the value of s (Official Form	such assistance and have included it on <i>Schedule I:</i> \ n 1061 \	our Income		Your expe	enses
(Omeiai i om	1 1001.)				
	al or home ownership expenses for your residence. Is and any rent for the ground or lot.	nclude first mortgage	e 4. \$		650.00
If not inc	cluded in line 4:				
4a. Re	eal estate taxes		4a. \$		0.00
	operty, homeowner's, or renter's insurance		4b. \$		0.00
	ome maintenance, repair, and upkeep expenses		4c. \$		0.00
	omeowner's association or condominium dues nal mortgage payments for your residence, such as ho	me equity loans	4d. \$ 5. \$		0.00
J. Addition	iai mangaga paymanta iai yaan tasidanca, sucii da 110	mo oquity idalis	υ. φ		0.00

Debtor 1	Dwayne Allen Derring	Case num	ber (if known)	
	ne:			
6. Utilitie 6a.	es: Electricity, heat, natural gas	6a.	\$	0.00
	Water, sewer, garbage collection	6b.	\$	0.00
	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	40.00
	Other. Specify:	6d.	*	
			·	0.00
	and housekeeping supplies	7.	\$	325.00
	care and children's education costs	8.	\$	0.00
	ing, laundry, and dry cleaning	9.	\$	50.00
	onal care products and services	10.	\$	50.00
	al and dental expenses	11.	\$	80.00
	portation. Include gas, maintenance, bus or train fare.	12.	\$	50.00
	t include car payments.		·	
	tainment, clubs, recreation, newspapers, magazines, and books	13.	\$	25.00
	table contributions and religious donations	14.	\$	0.00
5. Insura				
	t include insurance deducted from your pay or included in lines 4 or 20.	150	¢	0.00
	Life insurance	15a.	·	0.00
	Health insurance	15b.		0.00
	Vehicle insurance	15c.		0.00
	Other insurance. Specify:	15d.	\$	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.			
Specif	·	16.	\$	0.00
	Iment or lease payments:	_		
17a.	Car payments for Vehicle 1	17a.	\$	0.00
17b.	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify:	17c.	\$	0.00
17d.	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report as			
	cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
	payments you make to support others who do not live with you.		\$	0.00
Specif	fy:	19.		
). Other	real property expenses not included in lines 4 or 5 of this form or on Scho	edule I: Yo	our Income.	
20a.	Mortgages on other property	20a.	\$	0.00
20b.	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	Homeowner's association or condominium dues	20e.	·	0.00
	: Specify:	21.	·	0.00
. Guiei	. Opeony.		- Ψ	0.00
2. Calcu	late your monthly expenses			
	Add lines 4 through 21.		\$	1,270.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$,=
			· ·	4 270 00
220. A	add line 22a and 22b. The result is your monthly expenses.		\$	1,270.00
3. Calcu	late your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,282.00
	Copy your monthly expenses from line 22c above.	23b.		1,270.00
		_00.	·	.,270.00
23c.	Subtract your monthly expenses from your monthly income.			
	The result is your <i>monthly net income</i> .	23c.	\$	12.00
	Jour monthly not moonly.			
4. Do yo	ou expect an increase or decrease in your expenses within the year after you	ou file this	form?	
For exa	ample, do you expect to finish paying for your car loan within the year or do you expect you			or decrease because of a
modific	eation to the terms of your mortgage?			
■ No				
☐ Ye				

Fill in this inform	nation to identify your	case:			
Debtor 1	Dwayne Allen Dei	rring			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	EASTERN DISTRICT	OF TENNESSEE		
Case number					☐ Check if this is an amended filing
Official Form					
Declarati	ion About a	ın Individua	ıl Debtor's S	chedules	12/15
obtaining money years, or both. 18		n connection with a ba			tement, concealing property, or 00, or imprisonment for up to 20
Did you pay	or agree to pay some	one who is NOT an att	orney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes. Na	ame of person				nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	ty of perjury, I declare true and correct.	that I have read the su	mmary and schedules fil	led with this declarati	ion and
Dwayne	yne Allen Derring e Allen Derring e of Debtor 1		X Signature of	of Debtor 2	

Date November 7, 2023

Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee
+ \$15	trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$571 administrative fee \$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of Tennessee

In re	Dwayne Allen Derring		Case No.	
		Debtor(s)	Chapter	7

VERIFICATION OF CREDITOR MATRIX

The above Debtor(s) hereby verifies under the penalty of perjury under the laws of the United States of America that the attached list of creditors is true and correct to the best of his/her knowledge.

Knoxville, TN 37919 865-281-8084 Fax: 865-862-8967 Advance America 4421 Western Avenue Knoxville, TN 37921

AFNI PO Box 3097 Bloomington, IL 61702

Bulwark Exterminating, LLC P.O Box 2180 Queen Creek, AZ 85142

Check Into Cash 361 South Illinois Avenue Oak Ridge, TN 37830

Convergent Outsourcing 500 SW 7th St Building A 100 Renton, WA 98055-2983

Fingerhut/ Web Bank 6250 Ridgewood Road Saint Cloud, MN 56303

First National Credit Card CMC 500 E. 60th St. N. Sioux Falls, SD 57104

First Premier 3820 N Louise Avenue Sioux Falls, SD 57107

First Savings Bank/Blaze PO Box 5065 Sioux Falls, SD 57117-5065

Fort Sanders Regional Medical Ctr. 1420 Centerpoint Blvd., Bldg C. Knoxville, TN 37932

FSNB N.A. 511 SW A Avenue Lawton, OK 73501

Humana PO Box 14601 Lexington, KY 40512-4601

Ingenio PO Box San Antonio, TX 78265 Knox County General Sessions Court Attn Wanda 300 Main Street Room 318 Knoxville, TN 37902

Knoxville HMA Cardiology PO Box 79951 Baltimore, MD 21279

Mason Easy Pay P.O. Box 77001 Madison, WI 53707-1001

McKesson Patient Care Solutions Inc PO Box 645034 Pittsburgh, PA 15264

Methodist Medical Center Knoxville Business Office Bldg. C 1420 Centerpoint Blvd. Knoxville, TN 37932

Midland Credit Management 2365 Northside Drive #300 San Diego, CA 92108-2709

Nathan L Horton Esquire 140 Corporate Blvd Norfolk, VA 23502

Nationwide Credit, Inc. PO Box 26314 Lehigh Valley, PA 18002

Parkwest Medical Center Knoxville Business Office Service 1420 Centerpointe Blvd Building C Knoxville, TN 37932

Portfolio Recovery Associates 120 Corporate Blvd., Ste 100 Norfolk, VA 23502

Premier Surgical Assoc P.O. Box 1512 Knoxville, TN 37901

Professional Account Services, Inc. PO Box 188
Brentwood, TN 37024

Quest Diagnostics PO Box 740777 Cincinnati, OH 45274

Recievables Performance Management PO Box 1548 Lynnwood, WA 98046

Report Inc P.O. Box 10305 Knoxville, TN 37939-0305

Security Finance PO Box 3146 Spartanburg, SC 29304

Sunrise Credit Services P.O. Box 9100 Farmingdale, NY 11735

Tennova Turkey Creek Medical Center PO Box 188
Brentwood, TN 37024

The Danbury Mint PO Box 371323 Pittsburgh, PA 15250

The Endoscopty Center West PO Box 59002 Knoxville, TN 37950

The Endoscopy Center 1311 Dowell Spring Blve. Ste 200 Knoxville, TN 37909-2707

US Bank 10626 Hardin Valley Road Knoxville, TN 37931

Wakefield and Associates PO Box 50250 Knoxville, TN 37950-0250

Xfinity PO Box 2127 Norcross, GA 30091-2127